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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/617,624	07/17/2000	Tim Carroll	068167.0104

41505
WOODCOCK WASHBURN LLP
ONE LIBERTY PLACE - 46TH FLOOR
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CONFIRMATION NO. 8509



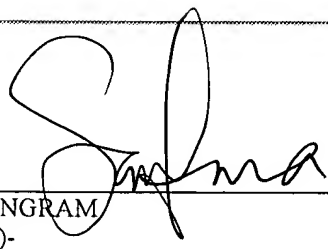
OC000000017128897

Date Mailed: 09/29/2005

NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 06/29/2005.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.



JOHN INGRAM
PUBS ()-

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Bib Data Sheet

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SERIAL NUMBER 09/617,624	FILING OR 371(c) DATE 07/17/2000 RULE	CLASS 703	GROUP ART UNIT 2123	ATTORNEY DOCKET NO. 068167.0104	
APPLICANTS Tim Carroll, Redwood City, CA; Aaron Giles, Sunnyvale, CA;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/01/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
ADDRESS 41505					
TITLE SYSTEM AND METHOD FOR EMULATING THE OPERATION OF A VIDEO GRAPHICS ADAPTER					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		